## U.S. Label Action Checklist and Approval Form

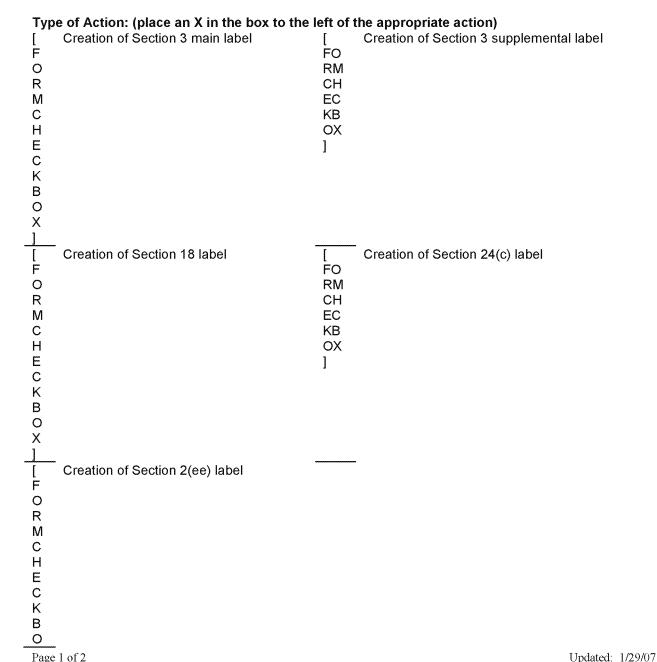
To initiate this form, do the following (DO NOT delete or alter any section of this form):

- Place an X in the box under Type of Action (see below).
- Fill in product name, active ingredient(s), and EPA registration number.
- If form is for a Section 18 or 24(c) label, fill out the appropriate section. If form is not for Section 18 or 24(c) label, ignore these sections.
- Fill in the person's name next to the appropriate role for the product.
- List the label changes on the last page of the form.
- Send the form via e-mail to the Regulatory Specialist for the product.

To approve this form, do the following:

- Fill out the Key Questions/Information Required for your role.
- Put the date of your approval in the Approval Date column on the same line as your name.

Note: This form is to approve the proposed action, not review/approve the draft or proposed label. <u>All</u> sections of this form <u>must</u> be completed prior to initiation of draft labeling by the Regulatory Specialist.



X				
1		_		
[ F O	Amendment of Section 3 main label	[ FO RM	Amendment of Section 3 supplemental label	
R M		CH EC		
С		KB		
H E		ox ]		
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[ F	Amendment of Section 18 label	[ FO	Amendment of Section 24(c) label	
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<u> </u>	Amendment of Section 2(ee) label	***************************************		
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Product Name: [PAGE][FORMTEXT] a.i.: [FORMTEXT]  EPA Reg. No.: [FORMTEXT]				
If Section 18, what is the objective: [FORMTEXT]  If Section 18, who is sponsoring (e.g., state, commodity groups): [FORMTEXT]				
If Se	If Section 24(c), what is the objective: [FORMTEXT]			

**Approval:** (include date in Approval Date column in the row containing your name)

Role	Name	Input/Comments	Approval Date
Product Technology Specialist	[FORMTEXT]	[FORMTEXT]	[FORMTEXT]
Marketing Specialist	[FORMTEXT]	[FORMTEXT]	[FORMTEXT

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Tech Expert	[FORMTEXT]	[FORMTEXT]	[FORMTEXT]
Federal Regulatory Manager	[FORMTEXT]	[FORMTEXT]	[FORMTEXT]
State Regulatory Manager	[FORMTEXT]	[FORMTEXT]	[FORMTEXT]

## Key Questions/Information Required (Information Provided by Tiger Team):

**Product Technology Specialist** 

ſ	*	Use directions for proposed use or list of proposed label changes,	[FORMTEXT]
		including those listed on label bulletin board (Yes/No): (Provide text/create	
		list on page 2 or embed Word document on page 2)	
	8	Sec 18/24(c) labels only: Include Special Conditions of Use (which was	[FORMTEXT]
		previously called Waiver of Liability) on label (Yes/No):	

Marketing Specialist:

[FORMTEXT]
[FORMTEXT]
[FORMTEXT]
[FORMTEXT]
\$[ FORMTEXT ]
[FORMTEXT]
Date: [FORMTEXT
]
[FORMTEXT]
[FORMTEXT]
[FORMTEXT]
[FORMTEXT]

Technical Expert (Review and Comment with Input from Product Technology Specialist):

*	Availability of efficacy and/or crop safety data required by Cal DPR?:	[FORMTEXT]
	(Data must be supplied to Regulatory (State Regulatory Assistant) before	
	label before product(s) can be registered in the states.)	
*	Has risk/benefit review been conducted (e.g., crop safety, efficacy) (Yes/No):	[FORMTEXT]
*	Risk score from Decision Tree Risk Matrix (<45, between 45 and 65, >65): (If score is greater than 65, Special Conditions of Use language may be required.)	[FORMTEXT]

Federal Regulatory Manager:

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If changes are mandatory, can other changes be made simultaneously	[FORMTEXT]
(Yes/No):	
Any outstanding data requirements at EPA (Yes/No):	[FORMTEXT]
Sec 3 labels only: Last EPA label submission date:	Date: [ FORMTEXT
(Note: No overlapping label amendments are allowed.)	]
Sec 3 labels only: Target EPA submission date:	Date: [FORMTEXT
(Note: Nominal review time is 90 days for amendments requiring no data; up	]
to 2 years for new crops with PRIA.)	
• Is proposed use consistent with federal regulatory strategy (Yes/No):	[FORMTEXT]
Amendment cost – EPA fee for service:	\$[FORMTEXT]
• Sec 3 main label only: Will there be any post-approval label activities, i.e,.	[FORMTEXT]

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registration of ABN, roll same changes onto ABN label, a subset of registered	
uses commercialized (Marketing Specialist to be consulted) (Yes/No)	
If yes, provide specific details:	[FORMTEXT]

State Regulatory Manager:

List any special considerations (e.g., PPE for urban pest, special state agreements, etc.):	[FORMTEXT]
State registration fees associated with this action:	\$[ FORMTEXT ]
Any outstanding data requirements in the state(s):	[FORMTEXT]
All necessary data/information will be assembled and available to support application: (Data must be supplied to Regulatory (State Regulatory Assistant) before product(s) can be registered in the states.)	[FORMTEXT]
Sec 18/24(c)/2(ee) labels only: Target submission date to state	Date: [ FORMTEXT
Sec 18 label only: Is there pending Section 3 (Yes/No):	[FORMTEXT]
♦ If so, anticipated approval date:	Date: [ FORMTEXT ]

Listing of proposed label change concepts to be provided by Product Technology Specialist (e.g., addition of a pest, change of buffer zone, application timing etc.)

- 1. [FORMTEXT]
- 2. [FORMTEXT]
- 3. [FORMTEXT]

[FORMTEXT]

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